## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

as a below named inventor, I (we) hereby declare that:

and was amended on

My residence, post office address and citizenship are the same as stated below next to my name.

an c		d joint inve	entor (if plura	l names ar	e listed below) of th		e is listed below) or ect matter which is
"S	stackable Conta	iner, Paper	Holder or the	e Like "			
the	specification of		eck one):				
تـــا	is attached he	T				-γ	
X	was filed on	vas filed on November 12, 2003		as Appl	ication Serial No.	10/706,764	
	and was amer	nded on			(if applicable).		
П	was filed as P	CT Interna	tional applica	ition No.		on	

I (we) hereby state that I (we) have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

(if applicable).

I (we) acknowledge the duty to disclose information known to me to be material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I (we) hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Number	Country	Filing Date (mm/dd/yyyy)	Priority Claimed		
MI2002 A 002398	IT	11/13/2002	X Yes No		

I (we) hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Number		Filing Date (mm/dd/yyyy)

I (we) hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulation, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application Serial No.	Filing Date (d/m/y)	Status (Patented, Pending, Abandoned)

I (we) hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Henry D. Coleman, Reg. No. 32,559; R. Neil Sudol, Reg. No. 31,669; William J. Sapone, Reg. No. 32,518

all of

COLEMAN SUDOL SAPONE, P.C. 714 Colorado Avenue Bridgeport, CT 06605-1601

Direct all telephone calls to:	R. Neil Sudol	at Telephone No. (203) 366-3560			
Address all correspondence to:	R. Neil Sudol	at			
,	COLEMAN SUDOL SAPONE, P.C. 714 Colorado Avenue Bridgeport, CT 06605-1601 United States of America				

I (we) hereby declare that all statements made herein of my (our) own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: . Mario BALZARINI Residence: . . . . . . . . . . . . Via Antiche fornaci, 51 26100 CREMONA, Italy Post Office Address:. . . . . . Country of Citizenship: . . . . Italy 19-02-2004 Inventor's Signature Date Full name of second inventor: . . Vittorio BALZARINI Via Persico, 9/b Residence: . . . . . . . . 26100 CREMONA, Italy Post Office Address:. . . . . . Country of Citizenship:. . . . . Italy 19-02-2004 Inventor's Signature Date Full name of third inventor: . . . Residence: . . . . . . . . . Post Office Address: . . . . . Country of Citizenship: . . . . Date Inventor's Signature Full name of fourth inventor: . . . Residence: . . . . . . . . . Post Office Address: . . . . . Country of Citizenship: . . . . Inventor's Signature Date